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**TO:**  
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**FROM:**  
William J. Allen

**COMPANY:**  
USPTO

**DATE:**  
September 2, 2005

**FAX NO.:**  
(571) 273-8300

**TOTAL NO. OF PAGES:** (including cover sheet)  
15

**Application Serial No.**  
10/614,313

**OUR REFERENCE (C/M) NO.:**  
004770.00116

**RE:** In re: Appln. Of Pekonen  
Appln. No. 10/614,313  
Filed: July 7, 2003

For: PROTOCOL USING FORWARD ERROR CORRECTION TO IMPROVE HANDOVER

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AMENDMENT

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/614,313	
	Filing Date	July 7, 2003	
	First Named Inventor	Pekonen	
	Art Unit	2883	
	Examiner Name	Huynh	
Total Number of Pages In This Submission	15	Attorney Docket Number	004770.00118

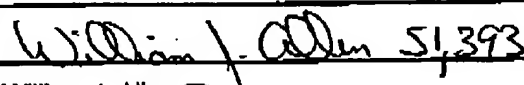
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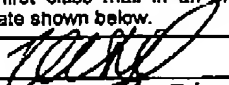
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ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet
<b>Remarks</b> The Commissioner is hereby authorized to charge any under payment of fees or credit any over payment of fees to Deposit Account Number 10-0733.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	William J. Allen		
Date	September 2, 2005	Reg. No.	51,393

## CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	R. BLANK	Date	September 2, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comment on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**(Attorney Docket No. 004770.00116)**

In re U.S. Patent Application of Pekonen )  
Application No. 10/614,313 ) Group Art Unit: 2683  
Filed: July 7, 2003 ) Examiner: Huynh  
For: Protocol Using Forward Error )  
Correction To Improve Handover )

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**RESPONSE TO OFFICE ACTION**

MS: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir,

This paper is responsive to the non-final Office Action dated June 7, 2005. The Examiner has set a three-month period for response, thus making this response due on or before September 7, 2005. The Commissioner is hereby authorized to charge any fee or credit any overpayment of fees to Deposit Account No. 19-0733.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.